

## Leading Healthcare

To: Members of the House Health Policy Committee

From: Chris Mitchell, Senior Vice President, Advocacy

Paige Fults, Director, Advocacy

Date: Nov. 29, 2017

Re: House Bills 4629-4631 – Safe Patient Care Act

Position: Oppose

The MHA is currently opposed to House Bills (HB) 4629-4631. Most hospital clinical and financial managers contend that mandated staffing ratios would have a serious negative impact on patient access to quality care and hospital financial viability. Staffing is a collaborative process, and a mandated, fixed ratio does not allow for flexibility or innovation within care teams.

Hospital staff models are developed and implemented to ensure safe, high-quality patient care. These staffing models are continuously adjusted on the basis of patient need and the experienced judgment of nurses on the floor. Unforeseen circumstances sometimes force healthcare providers to require staff to work outside of their normal schedules to ensure patient care, including unusually high patient-acuity levels, staff absences due to unforeseen personal circumstances, such as illness or family emergencies, and weather related staffing challenges.

While mandatory overtime is not the preferred option to staff a hospital, it must be available as an option to ensure appropriate patient care. When all other alternatives have been exhausted and care must be delivered to patients, the ability to require staff to remain in active roles is critical to patient safety. Hospitals currently employ the following efforts to avoid mandatory overtime whenever possible.

- Recruiting volunteers to fill staff shortages
- "On call" incentives to staff willing to be available for overtime
- · Offering part-time or per diem staff extra hours or shifts
- Drawing staff from a float or staffing pool
- Using traveling or agency staff
- Requiring managers and educators to work as direct caregivers
- Diverting ambulances and limiting patient census
- Actively supporting state legislation and proposed programs to increase educational capacity and nursing faculty to help solve the nursing shortage in Michigan

The MHA is committed to working with nurses to improve retention rates, address burnout and increase the number of high-quality education programs and resources available to educate both new and current nurse professionals. In fact, studies have shown that nurse training is the most important factor in assuring quality of care. However, the one-size-fits-all approach inherent in legislatively mandated decisions impacting clinical care typically fails to recognize the complexity of patient care and the diversity of healthcare environments. Given the number of variables that can impact patient care, including staff capabilities and patients' clinical needs, staffing decisions should continue to be made at the local level.

Please contact Paige Fults (pfults@mha.org) at (517) 703-8616 at the MHA if you have further questions regarding HBs 4629-4631.